

## 1630 ADMINISTRATIVE STANDARDS

EFFECTIVE DATE: May 13, 2016

REFERENCES: 42 C.F.R. §441.555c

### Support Coordinator Qualifications

Individuals hired as Support Coordinators will have:

- A. A bachelor's or master's degree in social worker or related field OR be a licensed registered nurse or Licensed Practical Nurse  
  
OR
- B. Two years' experience in providing support coordination (case management) services when the individual does not have a degree or a license  
  
OR
- C. A minimum of two consecutive years of experience in long term care services to persons who are elderly and/or persons with physical or developmental disabilities.

### Documentation

The Division uses the following standardized forms from the AHCCCS AMPM Chapter 1600:

- A. Uniform Assessment Tool
- B. Member Service Plan
- C. AHCCCS/ALTCS Member Contingency/Back-Up Plan

The Division has a mechanism to transmit Focus data elements to AHCCCS biweekly.

### Training

Adequate orientation and ongoing training on subjects relevant to the Division is provided. Documentation of training dates and staff attendance, and copies of materials used, are maintained for record keeping.

- A. The Division provides uniform training to all Support Coordinators. This includes formal training classes and mentoring-type opportunities for newly hired Support Coordinators.
- B. Newly hired Support Coordinators are provided orientation and training in the following areas:
  - 1. The role of the Support Coordinator in utilizing a member-centered approach to Arizona Long Term Care System (ALTCS) support coordination, including maximizing the role of the member and their family in decision-making and service planning
  - 2. The principle of most integrated, least restrictive settings for member placement
  - 3. Member rights and responsibilities

4. Support Coordination responsibilities as outlined in the AHCCCS AMPM Chapter 1600, including, but not limited to service planning, contingency plans, reporting service gaps and Notices of Action.
  5. Support Coordination procedures specific to the Division
  6. An overview of the AHCCCS/ALTCS program
  7. The continuum of ALTCS services, including available service delivery options, placement settings and service restrictions/limitations
  8. The Division provider network by location, service type and capacity, including information about community resources for non-ALTCS covered services.
  9. Information on local resources for housing, education and employment services/program that could help members gain greater self-sufficiency in the areas.
  10. Responsibilities related to monitoring for and reporting of quality of care concerns, including, but not limited to, suspected abuse, neglect and/or exploitation
  11. General medical information, such as symptoms, medications and treatments for diagnostic categories common to the population served by the Division.
  12. General social service information, such as family dynamics, care contracting, dealing with difficult people, risk management.
  13. Behavioral health information, including identification of member's behavioral health needs, covered behavioral health services and how to access those services within the Division's network, and the requirements for initial and quarterly behavioral health consultations
  14. The Pre-Admission Screening and Resident Review (PASRR) process
  15. Early and Periodic Screening, Diagnosis and Treatment (EPSDT) standards for members under the age of 21, and
  16. ALTCS management information system Client Assessment Tracking System (CATS) that maintains member-specific data such as Cost Effectiveness Studies, Placement/Residence codes, behavioral health codes, and review dates. The level of orientation to CATS will be dependent on the level of direct usage by Division staff.
- C. In addition to review of areas covered in orientation, all Support Coordinators are provided with regular ongoing training on topics relevant to the population served by the Division.

- D. The Division maintains staff who are designated as the expert(s) on housing, education and employment issues and resources within the Division's service area. These staff are available to assist Support Coordinators with up-to-date information designed to aid members in making informed decisions about their independent living options.

### **Caseload Management**

Adequate numbers of qualified and trained Support Coordinators are provided to meet the needs of enrolled members.

The Division has protocols to ensure newly enrolled ALTCS members are assigned to a Support Coordinator immediately upon enrollment.

### **Accessibility**

Members and/or member representatives are provided adequate information in order to be able to contact the Support Coordinator or DDD office for assistance, including what to do in cases of emergencies and/or after hours.

A system of back-up Support Coordinators is in place for members who contact an office when their primary support coordination is unavailable.

A mechanism is in place to ensure members, representatives and providers are called back in a timely manner when messages are left for Support Coordinators.

### **Time Management**

The Division ensures Support Coordinators are not assigned duties unrelated to member-specific support coordination for more than 15% of their time if they carry a full caseload.

### **Conflict of Interest**

The Division ensures Support Coordinators are not:

- A. Related by blood or marriage to a member, or any paid caregiver of a member, on their caseload
- B. Financially responsible for a member on their caseload
- C. Empowered to make financial or health-related decisions on behalf of a member on their caseload
- D. In a position to financially benefit from the provision of services to a member on their caseload
- E. Providers of ALTCS services for any member on their caseload
- F. Individuals who have an interest in, or are employed by, a provider of ALTCS services for any member on their caseload.

Exceptions to the above may be made under limited circumstances as described under 42 CFR 441.555c with prior approval from AHCCCS Administration.

### **Supervision**

A supervisor to Support Coordinator ratio is established that is conducive to a sound support structure for Support Coordinators. Supervisors must have adequate time to train and review the work of newly hired Support Coordinators and provide support and guidance to established Support Coordinators.

A system of internal monitoring of the support coordination program, to include case file audits and reviews of the consistency of member assessments and service authorizations, has been established and applied, at a minimum, on a quarterly basis.

Results from this monitoring, including the development and implementation of continuous improvement strategies to address identified deficiencies, are documented and made available to AHCCCS upon request.

### **Inter-Departmental Coordination**

The Division has established and implemented mechanisms to promote coordination and communication across disciplines and departments within their own organization, with particular emphasis on ensuring coordinated approaches with Medical Management (MM) and Quality Management (QM). For example, there is coordination of information between support coordination, MM and QM regarding poly-pharmacy issues to ensure measures are taken to effectively address this issue.

The Division's Medical Director is available as a resource to support coordination and is advised of medical management issues as needed.

### **Reporting Requirements**

A Support Coordination Plan is submitted annually to AHCCCS on or before November 15th. The plan addresses how the Division will implement and monitor the support coordination and administrative standards outlined in the AHCCCS AMPM Chapter 1600, including specialized caseloads.

An evaluation of the Division's Support Coordination Plan from the previous year is also included in the plan, highlighting lessons learned and strategies for improvement.